Senate File 2265 - Introduced

SENATE FILE BY COMMITTEE ON HUMAN RESOURCES

(SUCCESSOR TO SSB 3185)

Passed	Senate,	Date	Passed	House,	Date _	
Vote:	Ayes	Nays	Vote:	Ayes	N	ays
Approved					_	<u> </u>

A BILL FOR

- 1 An Act providing for establishment of a mental health services system for children and youth.
- 3 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:
- 4 TLSB 5355SV 82
- 5 jp/rj/14

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- Section 1. <u>NEW SECTION</u>. 225C.51 For the purposes of this division: 225C.51 DEFINITIONS.

 - "Child" or "children" means a person or persons under 1. 4 eighteen years of age.
 - 5 2. "Children's system" or "mental health services system 6 for children and youth" means the mental health services 7 system for children and youth implemented pursuant to this 8 division.
- 3. "Functional impairment" means difficulties that 1 10 substantially interfere with or limit a person from achieving 11 or maintaining one or more developmentally appropriate social, 1 12 behavioral, cognitive, communicative, or adaptive skills and 1 13 that substantially interfere with or limit the person's role 1 14 or functioning in family, school, or community activities.
 1 15 "Functional impairment" includes difficulties of episodic,
 1 16 recurrent, and continuous duration. "Functional impairment" 1 16 recurrent, and continuous duration. 1 17 does not include difficulties resulting from temporary and 1 18 expected responses to stressful events in a person's 1 19 environment.
- 4. "Other qualifying mental health disorder" means a 1 21 mental health crisis or any diagnosable mental health disorder 22 that is likely to lead to mental health crisis unless there is 1 23 an intervention.
- 5. "Serious emotional disturbance" means a diagnosable 25 mental, behavioral, or emotional disorder of sufficient 26 duration to meet diagnostic criteria specified within the most 1 27 current diagnostic and statistical manual of mental disorders 28 published by the American psychiatric association that results 29 in a functional impairment. "Serious emotional disturbance" 1 30 does not include substance use and developmental disorders 1 31 unless such disorders co=occur with such a diagnosable mental,
- 32 behavioral, or emotional disorder.
 33 6. "Youth" means a person eighteen years of age or older 33 1 34 but under twenty=two years of age who met the criteria for 35 having a serious emotional disturbance prior to the age of 1 eighteen.
 - Sec. 2. NEW SECTION. 225C.52 MENTAL HEALTH SERVICES 3 SYSTEM FOR CHILDREN AND YOUTH == PURPOSE.
- 2 Establishing a comprehensive community=based mental 5 health services system for children and youth is part of 2 6 fulfilling the requirements of the division and the commission 7 to facilitate a comprehensive, continuous, and integrated 8 state mental health services plan in accordance with sections 9 225C.4, 225C.6, and 225C.6A, and other provisions of this 10 chapter. The purpose of establishing the children's system is 11 to improve access for children and youth with serious 2 12 emotional disturbances and youth with other qualifying mental 2 13 health disorders to mental health treatment, services, and 2 14 other support in the least restrictive setting possible so the 2 15 children and youth can live with their families and remain in
- 2 16 their communities. The children's system is also intended to 2 17 meet the needs of children and youth who have mental health

2 18 disorders that co=occur with substance abuse, mental 2 19 retardation, developmental disabilities, or other 2 20 disabilities. The children's system shall emphasize 21 community=level collaborative efforts between children and 2 22 youth and the families and the state's systems of education, 2 23 child welfare, juvenile justice, health care, substance abuse, 24 and mental health.

2. The goals and outcomes desired for the children's 2 26 system shall include but are not limited to all of the 27 following:

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Identifying the mental health needs of children and 2 29 youth.

2 30 b. Performing comprehensive assessments of children and 31 youth that are designed to identify functional skills, 32 strengths, and services needed.

Providing timely access to available treatment, 34 services, and other support.

d. Offering information and referral services to families to address service needs other than mental health.

e. Improving access to needed mental health services by allowing children and youth to be served with their families in the community.

f. Preventing or reducing utilization of more costly, 6 restrictive care by reducing the unnecessary involvement of children and youth who have mental health needs and their 8 families with law enforcement, the corrections system, and 3 9 detention, juvenile justice, and other legal proceedings; 3 10 reducing the involvement of children and youth with child 3 11 welfare services or state custody; and reducing the placement 3 12 of children and youth in the state juvenile institutions, 13 state mental health institutes, or other public or private 3 14 residential psychiatric facilities.

g. Increasing the number of children and youth assessed 3 16 for functional skill levels.

h. Increasing the capacity to develop individualized, 3 18 strengths=based, and integrated treatment plans for children, 3 19 youth, and families.

Promoting communications with caregivers and others i. 3 21 about the needs of children, youth, and families engaged in 3 22 the children's system.

j. Developing the ability to aggregate data and 24 information, and to evaluate program, service, and system 3 25 efficacy for children, youth, and families being served on a 3 26 local and statewide basis.

Implementing and utilizing outcome measures that are 3 28 consistent with but not limited to the national outcomes 3 29 measures identified by the substance abuse and mental health 30 services administration of the United States department of 3 31 health and human services.

l. Identifying children and youth whose mental health or 33 emotional condition, whether chronic or acute, represents a 34 danger to themselves, their families, school students or 35 staff, or the community.

1 Sec. 3. <u>NEW SECTION</u>. 225C.53 ROLE 2 DIVISION == TRANSITION TO ADULT SYSTEM. ROLE OF DEPARTMENT AND

1. The department is the lead agency responsible for the 4 development, implementation, oversight, and management of the 5 mental health services system for children and youth in 6 accordance with this chapter. The department's 7 responsibilities shall be fulfilled by the division.

8 2. The division's responsibilities relating to the children's system include but are not limited to all of the 4 10 following:

a. Ensuring that the rules adopted for the children's system provide that, within the limits of appropriations for 4 13 the children's system, children and youth shall not be 4 14 inappropriately denied necessary mental health services.

Establishing standards for the provision of home and b. community=based mental health treatment, services, and other support under the children's system.

4 18 Identifying and implementing eligibility criteria for c. 4 19 the treatment, services, and other support available under the 4 20 children's system.

d. Ongoing implementation of recommendations identified through children's system improvement efforts.

3. An adult person who met the criteria for having a 24 serious emotional disturbance prior to the age of eighteen may qualify to continue services through the adult mental health

NEW SECTION. 225C.54 MENTAL HEALTH SERVICES Sec. 4. 4 28 SYSTEM FOR CHILDREN AND YOUTH == INITIAL IMPLEMENTATION.

The mental health services system for children and 4 30 youth shall be initially implemented by the division 4 31 commencing with the fiscal year beginning July 1, 2008. 32 division shall begin implementation by utilizing a competitive 4 33 bidding process to allocate state block grants to develop 34 services through existing community mental health centers, 35 providers approved in a waiver adopted by the commission to provide services to a county in lieu of a community mental 2 health center, and other local service partners. 3 implementation shall be limited to the extent of the 4 appropriations provided for the children's system.

In order to maximize federal financial participation in 6 the children's system, the division and the department's 7 Medicaid program staff shall analyze the feasibility of 8 leveraging existing Medicaid options, such as expanding the 9 home and community=based services waiver for children's mental 10 health services, reviewing the feasibility of implementing 11 other Medicaid options such as the federal Tax Equity and 5 12 Financial Responsibility Act of 1982 (TEFRA) option for 13 children with severe mental illness or emotional disturbance 14 and Medicaid administrative funding, and determining the need 5 15 for service enhancements through revisions to the Medicaid 5 16 state plan and the federal state children's health insurance 5 17 program and the healthy and well kids in Iowa program.

5 18 3. Initial block grants shall support a wide range of 5 19 children, youth, and family services and initiatives including 5 20 but not limited to school=based mental health projects, system 21 reviews providing service gap analysis, status studies of the 5 22 mental health needs of children and youth in representative 5 23 areas of the state, and mental health assessment capacity 24 development based in public and nonpublic schools and clinical 5 25 settings using standard functional assessment tools. The 5 26 purpose of developing the assessment capacity is to determine 5 27 childrens' and youths' degree of impairment in daily 5 28 functioning due to emotional, behavioral, psychological,

5 29 psychiatric, or substance use problems.

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30 4. The initial block grants may also support an array of 31 programs and services including but not limited to mobile 5 32 crisis intervention services, or other support intended to 33 prevent more intensive or in=patient interventions, skills 34 training, intensive care coordination, and 35 cognitive=behavioral and multisystemic family therapy. 1 addition, support may be provided for prevention=oriented 2 services including mental health consultations regarding home 3 visits, child welfare, juvenile justice, and maternal and 4 child health services, and consultation for preschool 5 programs.

5. The division shall report regularly to the commission, 7 general assembly, and governor concerning the implementation 8 status of the children's system, including but not limited to 9 an annual report submitted each January. The report may 10 address funding requirements and statutory amendments 6 11 necessary to further develop the children's system.

This bill provides for creation of a mental health services 6 14 system for children and youth by the division of mental health 6 15 and disability services of the department of human services.

EXPLANATION

6 16 New Code section 225C.51 provides definitions of the terms 6 17 "child" or "children", "children's system" or "mental health 6 18 services system for children and youth", "functional 6 19 impairment", "other qualifying mental health disorder" 6 20 "serious emotional disturbance", and "youth". "Youth" "Youth" is 6 21 defined to mean a person age 18 or older but less than age 22 6 22 who met the criteria for having a serious emotional 23 disturbance prior to age 18.
24 New Code section 225C.52 states the purpose and the goals

6 25 and outcomes desired for the children's system. The purpose 26 is to improve access for children and youth with serious 27 emotional disturbances and youth with other qualifying mental 6 28 health disorders to mental health treatment, services, and 29 other support in the least restrictive setting possible so the 30 children and youth can live with their families and remain in 6 31 their communities.

New Code section 225C.53 outlines the role of the 33 department of human services as the lead agency for the 34 children's system and designates the division of mental health 35 and disability services to fulfill various responsibilities 1 relating to the system.

New Code section 252C.54 outlines requirements for the 3 initial implementation of the system in FY 2008=2009 using 4 competitive block grants through existing community mental

5 health centers, providers approved to provide services in 6 place of a community mental health center, and other local 7 service providers, requiring the department to analyze options 8 for leveraging additional Medicaid options, and engaging local 9 school, child welfare, juvenile justice, mental health, and 7 10 health care professionals. Certain services, such as 11 school=based mental health services and the development of 7 12 mental health assessment capacity based in public and 7 13 nonpublic schools and clinical settings, are required to be 14 supported through the block grants. The services supported 7 15 may also include other services such as mobile crisis 7 16 intervention services and prevention=oriented services. 7 17 The division is required to regularly report on the status 18 of the implementation to the mental health, mental 7 19 retardation, developmental disabilities, and brain injury 7 20 commission, governor, and general assembly, including an 7 21 annual report each January. 7 22 LSB 5355SV 82 7 23 jp/rj/14